

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Diane Black for Congress

ADDRESS (number and street)

PO Box 1437

Check if different
than previously
reported. (ACC)

Gallatin

TN

37066-1437

2. FEC IDENTIFICATION NUMBER ▼

C

C00472878

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

TN

06

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. Tommy Whittaker

Signature of Treasurer

Mr. Tommy Whittaker

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

10

15

2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Diane Black for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	5

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	315173.41	582908.41
(b) Total Contribution Refunds (from Line 20(d))	900.00	900.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	314273.41	582008.41
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	110037.53	229720.30
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	481.60
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	110037.53	229238.70
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1357091.17	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 86

Write or Type Committee Name

Diane Black for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	5

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

196335.66

237235.66

(ii) Unitemized.....

2400.00

5485.00

(iii) TOTAL of contributions from individuals ▶

198735.66

242720.66

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

116437.75

340187.75

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

315173.41

582908.41

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

481.60

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

315173.41

583390.01

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 86

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	110037.53	229720.30
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	900.00	900.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	900.00	900.00
21. OTHER DISBURSEMENTS	40500.00	95500.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	151437.53	326120.30

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1193355.29
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	315173.41
25. SUBTOTAL (add Line 23 and Line 24).....	1508528.70
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	151437.53
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1357091.17

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

MR. ROBERT L. ALLEN

A.

Mailing Address 405 CONCORD DR.

City

COOKEVILLE

State

TN

Zip Code

38501-3079

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2015

Transaction ID : SA11.6243

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MS. LINDA AUSTIN

B.

Mailing Address 753 OLD HIGHWAY 52

City

LAFAYETTE

State

TN

Zip Code

37083-2612

FEC ID number of contributing
federal political committee.

C

Name of Employer

TRI-AGE ADVENTURES, INC

Occupation

ADMINISTRATOR

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6321

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

J. BARRY BANKER

C.

Mailing Address 1033 CHANCERY LN

City

NASHVILLE

State

TN

Zip Code

37215-4523

FEC ID number of contributing
federal political committee.

C

Name of Employer

STEWART HOME SCHOOL

Occupation

MANAGER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2015

Transaction ID : SA11.6340

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

MS. K. JEAN BEAUCHAMP

A.

Mailing Address 2737 WOODS ROAD

City

SPRINGFIELD

State

TN

Zip Code

37172-5641

FEC ID number of contributing
federal political committee.

C

Name of Employer

CLARKSVILLE PEDIATRIC DENTISTRY

Occupation

DENTIST

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2015

Transaction ID : SA11.6330

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JACK BELL

B.

Mailing Address 729 OLD HORN SPRINGS ROAD

City

LEBANON

State

TN

Zip Code

37087-1814

FEC ID number of contributing
federal political committee.

C

Name of Employer

BELL COMPANY

Occupation

CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2015

Transaction ID : SA11.6335

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MRS. NOROMA C. BENZ

C.

Mailing Address 1236 TWELVE STONES CROSSING

City

GOODLETTSVILLE

State

TN

Zip Code

37072-3322

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2015

Transaction ID : SA11.6328

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

MRS. DEBRA BOLES

A.

Mailing Address 4610 BEAR LAKE ROAD

City

COOKEVILLE

State

TN

Zip Code

38506-3109

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

Transaction ID : SA11.6208

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. JOHN BOSKIND

B.

Mailing Address 125 CUMBERLAND SHORES DRIVE

City

HENDERSONVILLE

State

TN

Zip Code

37075-4143

FEC ID number of contributing
federal political committee.

C

Name of Employer

SURGEONS GROUP

Occupation

PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		01		2015

Transaction ID : SA11.6156

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. JOHN BOSKIND

C.

Mailing Address 125 CUMBERLAND SHORES DRIVE

City

HENDERSONVILLE

State

TN

Zip Code

37075-4143

FEC ID number of contributing
federal political committee.

C

Name of Employer

SURGEONS GROUP

Occupation

PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		30		2015

Transaction ID : SA11.6304

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

CHARLOTTE T. BRAUER

A.

Mailing Address 1402 ROZELLA WAY

City

GALLATIN

State

TN

Zip Code

37066-7571

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2015

Transaction ID : SA11.6350

Amount of Each Receipt this Period

5400.00

CONTRIBUTION

SEE REATTRIBUTION

Full Name (Last, First, Middle Initial)

CHARLOTTE T. BRAUER

B.

Mailing Address 1402 ROZELLA WAY

City

GALLATIN

State

TN

Zip Code

37066-7571

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6350B

Amount of Each Receipt this Period

-2700.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION TO SPOUSE

Full Name (Last, First, Middle Initial)

JEFFREY BRAUER

C.

Mailing Address 1402 ROZELLA WAY

City

GALLATIN

State

TN

Zip Code

37066-7571

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6412

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION FROM SPOUSE

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5400.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 9 OF 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

ASHLEY BRAY

A.

Mailing Address 311 E SPRING STREET

City

COOKEVILLE

State

TN

Zip Code

38501-3311

FEC ID number of contributing
federal political committee.

C

Name of Employer

WESLEY THOMAS BRAY ATTORNEY AT LAW

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2015

Transaction ID : SA11.6255

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ALICE BURNETT

B.

Mailing Address 4420 HILHAM RD.

City

COOKEVILLE

State

TN

Zip Code

38506-7118

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2015

Transaction ID : SA11.6247

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JAMES H. BURNETT III

C.

Mailing Address 8215 VICTORY TRL

City

BRENTWOOD

State

TN

Zip Code

37027-7374

FEC ID number of contributing
federal political committee.

C

Name of Employer

SMS HOLDINGS

Occupation

EXECUTIVE VP/CHIEF DEVELOPMENT OFFI

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2015

Transaction ID : SA11.6338

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2250.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

BARNEY D. BYRD

A.

Mailing Address 391 KINNIE RD.

City

FRANKLIN

State

TN

Zip Code

37069-1905

FEC ID number of contributing
federal political committee.

C

Name of Employer
GEN CAP AMERICA, INC.Occupation
INVESTMENTS

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6368

Amount of Each Receipt this Period

4000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

CARROLL CARMAN

B.

Mailing Address 150 MIDDLE FORK ROAD

City

HARTSVILLE

State

TN

Zip Code

37074-3223

FEC ID number of contributing
federal political committee.

C

Name of Employer
GENE CARMAN REAL ESTATEOccupation
SURVEYOR

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		29		2015

Transaction ID : SA11.6293

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

LTG. DENNIS D. CAVIN

C.

Mailing Address 1167 PLANTATION PASS

City

GALLATIN

State

TN

Zip Code

37066-7403

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		21		2015

Transaction ID : SA11.6336

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

MS. KIRSTEN A. CHADWICK

Mailing Address 601 PRESIDENT FORD LANE

City

ALEXANDRIA

State

VA

Zip Code

22302-3033

FEC ID number of contributing
federal political committee.

C

Name of Employer

FIERCE ISAKOWITZ & BLALOCK

Occupation

CONSULTANT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6316

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

GRETCHEN COX

Mailing Address 1018 ISAAC FRANKLIN DR

City

GALLATIN

State

TN

Zip Code

37066-7421

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROVIDENCE HEALTH GROUP

Occupation

R.N.

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6307

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MRS. JEAN DAVIS

Mailing Address 745 CLARK AVE

City

COOKEVILLE

State

TN

Zip Code

38501-2844

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		26		2015

Transaction ID : SA11.6203

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

MR. RON DEBERRY**A.**

Mailing Address 102 BLUEWATER DR.

City

GALLATIN

State

TN

Zip Code

37066-4455

FEC ID number of contributing
federal political committee.

C

Name of Employer

COMMERCE UNION BANK

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6318

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. WILLIAM PETE T. DELAY**B.**

Mailing Address 115 LYNNWOOD TERRACE

City

NASHVILLE

State

TN

Zip Code

37205-2911

FEC ID number of contributing
federal political committee.

C

Name of Employer

SHERMAN DIXIE

Occupation

CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2015

Transaction ID : SA11.6262

Amount of Each Receipt this Period

5400.00

CONTRIBUTION

REATTRIBUTION / REDESIGNATION REQUESTED
(AUTOMATIC)

Full Name (Last, First, Middle Initial)

MR. FRED DETTWILLER**C.**

Mailing Address 301 GREAT CIRCLE ROAD

City

NASHVILLE

State

TN

Zip Code

37228-1703

FEC ID number of contributing
federal political committee.

C

Name of Employer

DET DISTRIBUTING CO.

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2015

Transaction ID : SA11.6329

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

7400.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

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PAGE 13 OF 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

MRS. KATHRYN S. DETWILER

A.

Mailing Address 1570 COUNTRY CLUB PLACE

City

COOKEVILLE

State

TN

Zip Code

38501-2062

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2015

Transaction ID : SA11.6245

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JAMES E. DUNLAP

B.

Mailing Address 1070 SIR FRANCIS CT

City

GALLATIN

State

TN

Zip Code

37066-7467

FEC ID number of contributing
federal political committee.

C

Name of Employer

FIRE PROTECTION SERVICES

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2015

Transaction ID : SA11.6341

Amount of Each Receipt this Period

1350.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

WILLIAM L. DUNN

C.

Mailing Address 1100 WALL AVE.

City

COOKEVILLE

State

TN

Zip Code

38501-4249

FEC ID number of contributing
federal political committee.

C

Name of Employer

CUMBERLAND AUTO CENTER

Occupation

AUTO DEALER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2015

Transaction ID : SA11.6204

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1900.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 86
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Diane Black for Congress

A. Full Name (Last, First, Middle Initial) RICHARD W. DYCUS D.D.S.		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2015	
Mailing Address 390 S LOWE AVE, STE G		Transaction ID : SA11.6209	
City COOKEVILLE	State TN	Zip Code 38501-4703	Amount of Each Receipt this Period 2700.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer SELF-EMPLOYED	Occupation DENTIST		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00		

B. Full Name (Last, First, Middle Initial) LOWELL EBERSOLE		Date of Receipt M M / D D / Y Y Y Y 08 / 24 / 2015	
Mailing Address 116 EVERGREEN PLACE		Transaction ID : SA11.6240	
City COOKEVILLE	State TN	Zip Code 38506-4925	Amount of Each Receipt this Period 300.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer N/A	Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

C. Full Name (Last, First, Middle Initial) MR. SCOTT B. EBERSOLE		Date of Receipt M M / D D / Y Y Y Y 08 / 24 / 2015	
Mailing Address 560 WINDROWE DR.		Transaction ID : SA11.6196	
City COOKEVILLE	State TN	Zip Code 38506-4253	Amount of Each Receipt this Period 1000.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer E COM, INC.	Occupation PRESIDENT		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

SUBTOTAL of Receipts This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

MRS. SHERRY L. EDEN

Mailing Address 7769 MELTON ROAD

City

WHITE HOUSE

State

TN

Zip Code

37188-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		21		2015

Transaction ID : SA11.6326

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MRS. BARBARA A. EVANS

Mailing Address 155 CUMBERLAND DR.

City

HENDERSONVILLE

State

TN

Zip Code

37075-5301

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		30		2015

Transaction ID : SA11.6406B

Amount of Each Receipt this Period

-2700.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

Full Name (Last, First, Middle Initial)

MRS. BARBARA A. EVANS

Mailing Address 155 CUMBERLAND DR.

City

HENDERSONVILLE

State

TN

Zip Code

37075-5301

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

HOMEMAKER

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		30		2015

Transaction ID : SA11.6411

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 16 OF 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

MR. JOHN EVANS

Mailing Address 155 CUMBERLAND DR.

City

HENDERSONVILLE

State

TN

Zip Code

37075-5301

FEC ID number of contributing
federal political committee.

C

Name of Employer

NEXT GENERATION UNDERWRITING

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6370

Amount of Each Receipt this Period

10800.00

CONTRIBUTION

SEE REATTRIBUTION

Full Name (Last, First, Middle Initial)

MRS. BARBARA A. EVANS

Mailing Address 155 CUMBERLAND DR.

City

HENDERSONVILLE

State

TN

Zip Code

37075-5301

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6406

Amount of Each Receipt this Period

5400.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION FROM SPOUSE

Full Name (Last, First, Middle Initial)

MR. JOHN EVANS

Mailing Address 155 CUMBERLAND DR.

City

HENDERSONVILLE

State

TN

Zip Code

37075-5301

FEC ID number of contributing
federal political committee.

C

Name of Employer

NEXT GENERATION UNDERWRITING

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6370B

Amount of Each Receipt this Period

-5400.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION TO SPOUSE

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

10800.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 17 OF 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

MR. JOHN EVANS

Mailing Address 155 CUMBERLAND DR.

City

HENDERSONVILLE

State

TN

Zip Code

37075-5301

FEC ID number of contributing
federal political committee.

C

Name of Employer

NEXT GENERATION UNDERWRITING

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		30		2015

Transaction ID : SA11.6407B

Amount of Each Receipt this Period

-2700.00

CONTRIBUTION

[MEMO ITEM]

REDESIGNATION TO GENERAL

Full Name (Last, First, Middle Initial)

MR. JOHN EVANS

Mailing Address 155 CUMBERLAND DR.

City

HENDERSONVILLE

State

TN

Zip Code

37075-5301

FEC ID number of contributing
federal political committee.

C

Name of Employer

NEXT GENERATION UNDERWRITING

Occupation

PRESIDENT

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		30		2015

Transaction ID : SA11.6409

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

[MEMO ITEM]

REDESIGNATION FROM PRIMARY

Full Name (Last, First, Middle Initial)

MRS. KELLI F. FISCHER

Mailing Address 875 PLANTATION BLVD.

City

GALLATIN

State

TN

Zip Code

37066-4497

FEC ID number of contributing
federal political committee.

C

Name of Employer

FISCHER FAMILY DENTISTRY

Occupation

DENTIST

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		29		2015

Transaction ID : SA11.6303

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

BRENDA FLOETER

A.

Mailing Address 403 NASH AVE

City

COOKEVILLE

State

TN

Zip Code

38501-4500

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6308

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. GARRY M. FLOETER

B.

Mailing Address 347 E STEVENS ST.

City

COOKEVILLE

State

TN

Zip Code

38501-3541

FEC ID number of contributing
federal political committee.

C

Name of Employer

COOKEVILLE HEATING & COOLING

Occupation

CORPORATE OFFICER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2015

Transaction ID : SA11.6237

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

REATTRIBUTION / REDESIGNATION REQUESTED
(AUTOMATIC)

Full Name (Last, First, Middle Initial)

MS. ELIZABETH FOURNET

C.

Mailing Address 433 NASH AVE

City

COOKEVILLE

State

TN

Zip Code

38501-4500

FEC ID number of contributing
federal political committee.

C

Name of Employer

BANK OF PUTNAM COUNTY

Occupation

BANKER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2015

Transaction ID : SA11.6241

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3950.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

RONALD L. FRANKS**A.**

Mailing Address 1654 COOPER CREEK LN.

City

FRANKLIN

State

TN

Zip Code

37064-9335

FEC ID number of contributing
federal political committee.

C

Name of Employer

HFR DESIGN

Occupation

ARCHITECT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6371

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

REATTRIBUTION / REDESIGNATION REQUESTED
(AUTOMATIC)

Full Name (Last, First, Middle Initial)

MR. WILLIAM H. FRIST**B.**

Mailing Address 2525 WEST END AVE STE 1250

City

NASHVILLE

State

TN

Zip Code

37203-1770

FEC ID number of contributing
federal political committee.

C

Name of Employer

CRESSEY & CO.

Occupation

PARTNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6322

Amount of Each Receipt this Period

5400.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JAMES FROGUE**C.**

Mailing Address 1222 NORTH MEADE STREET

City

ARLINGTON

State

VA

Zip Code

22209-3724

FEC ID number of contributing
federal political committee.

C

Name of Employer

FROGUECLARK LLC

Occupation

CONSULTANT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		05		2015

Transaction ID : SA11.6193

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

10900.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

TIMOTHY A. FUNDERBURK**A.**

Mailing Address 405 N QUINLAND LAKE RD

City

COOKEVILLE

State

TN

Zip Code

38506-

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2015

Transaction ID : SA11.6246

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

AMY R. GALLAGHER**B.**

Mailing Address 2201 MASTERS DRIVE

City

SPRINGFIELD

State

TN

Zip Code

37172-4755

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2015

Transaction ID : SA11.6358

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. MICHAEL F. GAUGHAN**C.**

Mailing Address 120 ASHLAND PT.

City

HENDERSONVILLE

State

TN

Zip Code

37075-5544

FEC ID number of contributing
federal political committee.

C

Name of Employer

REMAX CHOICE PROPERTIES

Occupation

REALTOR

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2015

Transaction ID : SA11.6279

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1350.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

CINDY R. GIBSON

A.

Mailing Address 140 SARANAC TRL

City

HENDERSONVILLE

State

TN

Zip Code

37075-4589

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2015

Transaction ID : SA11.6342

Amount of Each Receipt this Period

1350.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. MR. ROBERT H. GOODALL JR.

Mailing Address 1459 ROZELLA WAY

City

GALLATIN

State

TN

Zip Code

37066-7571

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

HOMEBUILDER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2015

Transaction ID : SA11.6259

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

REATTRIBUTION / REDESIGNATION REQUESTED
(AUTOMATIC)

Full Name (Last, First, Middle Initial)

C. MR. ROBERT H. GOODALL JR.

Mailing Address 1459 ROZELLA WAY

City

GALLATIN

State

TN

Zip Code

37066-7571

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

HOMEBUILDER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2015

Transaction ID : SA11.6260

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6750.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 22 OF 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

MS. CHERYL HAGY

A.

Mailing Address 117 N WYNRIDGE WAY

City

GOODLETTSVILLE

State

TN

Zip Code

37072-8834

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

RESTAURANTEUR

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		29		2015

Transaction ID : SA11.6302

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JAMES N. HALL

B.

Mailing Address 1330 S MAPLE AVE.

City

COOKEVILLE

State

TN

Zip Code

38506-6203

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		24		2015

Transaction ID : SA11.6199

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. STAN HARDAWAY

C.

Mailing Address 176 JONES LANE

City

HENDERSONVILLE

State

TN

Zip Code

37075-8539

FEC ID number of contributing
federal political committee.

C

Name of Employer

HARDAWAY CONSTRUCTION

Occupation

CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		21		2015

Transaction ID : SA11.6327

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 23 OF 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

MR. TONEY HUDSON**A.**

Mailing Address 475 S MAPLE AVENUE

City

COOKEVILLE

State

TN

Zip Code

38501-3582

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

MD

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		24		2015

Transaction ID : SA11.6242

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. RICHARD ALLEN ISAACSON**B.**

Mailing Address 755 PLANTATION BLVD.

City

GALLATIN

State

TN

Zip Code

37066-7401

FEC ID number of contributing
federal political committee.

C

Name of Employer

SERVPRO

Occupation

OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

8100.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		24		2015

Transaction ID : SA11.6202

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SEE REATTRIBUTION

Full Name (Last, First, Middle Initial)

MRS. KRISTINE ISAACSON**C.**

Mailing Address 755 PLANTATION BLVD.

City

GALLATIN

State

TN

Zip Code

37066-7401

FEC ID number of contributing
federal political committee.

C

Name of Employer

SERVPRO INDUSTRIES

Occupation

EXECUTIVE VP

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		28		2015

Transaction ID : SA11.6256

Amount of Each Receipt this Period

2300.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION FROM SPOUSE**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

5250.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

MR. RICHARD ALLEN ISAACSON

A.

Mailing Address 755 PLANTATION BLVD.

City

GALLATIN

State

TN

Zip Code

37066-7401

FEC ID number of contributing
federal political committee.

C

Name of Employer
SERVPROOccupation
OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

8100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		28		2015

Transaction ID : SA11.6202B

Amount of Each Receipt this Period

-2300.00

CONTRIBUTION

[MEMO ITEM]

REATTRIBUTION TO SPOUSE

Full Name (Last, First, Middle Initial)

MR. RICHARD ALLEN ISAACSON

B.

Mailing Address 755 PLANTATION BLVD.

City

GALLATIN

State

TN

Zip Code

37066-7401

FEC ID number of contributing
federal political committee.

C

Name of Employer
SERVPROOccupation
OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

8100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6367

Amount of Each Receipt this Period

5400.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

CYNTHIA JACKSON

C.

Mailing Address POST OFFICE BOX 727

City

BAXTER

State

TN

Zip Code

38544-0727

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/AOccupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6305

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5650.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Diane Black for CongressFull Name (Last, First, Middle Initial)
BARRY LEE JACOBSON

Mailing Address 1239 CHLOE DR

City	State	Zip Code
GALLATIN	TN	37066-7597

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/AOccupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		30		2015

Transaction ID : SA11.6323

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. JOEY A. JACOBS

Mailing Address 9229 HUNTERBORO DR.

City	State	Zip Code
BRENTWOOD	TN	37027-6104

FEC ID number of contributing
federal political committee.

C

Name of Employer
ACADIA HEALTHCAREOccupation
CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		21		2015

Transaction ID : SA11.6345

Amount of Each Receipt this Period

5400.00

CONTRIBUTION

SEE REATTRIBUTION

Full Name (Last, First, Middle Initial)

MRS. DEBORAH H. JACOBS

Mailing Address 9229 HUNTERBORO DR.

City	State	Zip Code
BRENTWOOD	TN	37027-6104

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/AOccupation
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		30		2015

Transaction ID : SA11.6414

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION FROM SPOUSE

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5900.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

MR. JOEY A. JACOBS

A.

Mailing Address 9229 HUNTERBORO DR.

City

BRENTWOOD

State

TN

Zip Code

37027-6104

FEC ID number of contributing
federal political committee.

C

Name of Employer
ACADIA HEALTHCAREOccupation
CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6345B

Amount of Each Receipt this Period

-2700.00

CONTRIBUTION

[MEMO ITEM]

REATTRIBUTION TO SPOUSE

Full Name (Last, First, Middle Initial)

AMY LYNNE JENSEN CUNIFFE

B.

Mailing Address 7715 CROSSOVER DRIVE

City

MCLEAN

State

VA

Zip Code

22102-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFCOccupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2015

Transaction ID : SA11.6189

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. DONALD JOINER

C.

Mailing Address 1225 CHLOE DRIVE

City

GALLATIN

State

TN

Zip Code

37066-7597

FEC ID number of contributing
federal political committee.

C

Name of Employer
UNITED METHODIST CHURCHOccupation
CLERGY

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6320

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

750.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

MR. THOMAS H. JONES**A.**

Mailing Address 800 DRY VALLEY RD.

City

COOKEVILLE

State

TN

Zip Code

38506-4940

FEC ID number of contributing
federal political committee.

C

Name of Employer

RESEARCH ELECTRONICS INTERNATIONAL

Occupation

OWNER/ENGINEER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2015

Transaction ID : SA11.6234

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

WILLIAM A. JONES III**B.**

Mailing Address PO BOX 1015

City

CLEVELAND

State

TN

Zip Code

37364-1015

FEC ID number of contributing
federal political committee.

C

Name of Employer

JONES MANAGEMENT SERVICES

Occupation

EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2015

Transaction ID : SA11.6349

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

RONALD KIDD**C.**

Mailing Address 1636 BOARDWALK PLACE

City

GALLATIN

State

TN

Zip Code

37066-3561

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2015

Transaction ID : SA11.6164

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

5650.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 28 OF 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

THOMAS W. LAWLESS**A.**

Mailing Address 3921 FRANKLIN RD.

City

NASHVILLE

State

TN

Zip Code

37204-3509

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2015

Transaction ID : SA11.6265

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MRS. VIRGINIA B. LAZENBY**B.**

Mailing Address 1201 BELLE MEADE BOULEVARD

City

NASHVILLE

State

TN

Zip Code

37205-4507

FEC ID number of contributing
federal political committee.

C

Name of Employer

INDEPENDENT PETROLEUM ASSOC.

Occupation

VICE CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6319

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. ROBERT S. LIPMAN**C.**

Mailing Address P.O. BOX 280300

City

NASHVILLE

State

TN

Zip Code

37228-0300

FEC ID number of contributing
federal political committee.

C

Name of Employer

LIPMAN BROTHERS, INC.

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2015

Transaction ID : SA11.6346

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

4700.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 29 OF 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

MR. JAMES T. MARTIN**A.**

Mailing Address 1430 JAMESTOWN CT.

City

COOKEVILLE

State

TN

Zip Code

38501-3072

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2015

Transaction ID : SA11.6198

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. RICHARD L. MCDONALD**B.**

Mailing Address 1175 SHERATON DRIVE

City

COOKEVILLE

State

TN

Zip Code

38501-4514

FEC ID number of contributing
federal political committee.

C

Name of Employer

NUERA TRANSPORT, INC

Occupation

CONSULTANT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2015

Transaction ID : SA11.6236

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JACK MCKEE**C.**

Mailing Address 9530 GLYNN DOWNING DR.

City

OOLTEWAH

State

TN

Zip Code

37363-8141

FEC ID number of contributing
federal political committee.

C

Name of Employer

MCKEE FOODS

Occupation

EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2015

Transaction ID : SA11.6362

Amount of Each Receipt this Period

5400.00

CONTRIBUTION

SEE REATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

6650.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

BETTY MCKEE

A.

Mailing Address 9530 GLYNN DOWNING DR.

City

OOLTEWAH

State

TN

Zip Code

37363-8141

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6404

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

[MEMO ITEM]

REATTRIBUTION FROM SPOUSE

Full Name (Last, First, Middle Initial)

JACK MCKEE

B.

Mailing Address 9530 GLYNN DOWNING DR.

City

OOLTEWAH

State

TN

Zip Code

37363-8141

FEC ID number of contributing
federal political committee.

C

Name of Employer

MCKEE FOODS

Occupation

EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6362B

Amount of Each Receipt this Period

-2700.00

CONTRIBUTION

[MEMO ITEM]

REATTRIBUTION TO SPOUSE

Full Name (Last, First, Middle Initial)

DAVID MCMAHAN

C.

Mailing Address 1594 N DICKERSON CHAPEL RD

City

LEBANON

State

TN

Zip Code

37087-8146

FEC ID number of contributing
federal political committee.

C

Name of Employer

MCMAHAN WINSTEAD

Occupation

GOVERNMENT RELATIONS

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2015

Transaction ID : SA11.6334

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 31 OF 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

MR. GARRY MCNABB

A.

Mailing Address 1211 BILL SMITH ROAD

City

COOKEVILLE

State

TN

Zip Code

38501-4465

FEC ID number of contributing
federal political committee.

C

Name of Employer

HUGH E BAILEY & ASSOC.

Occupation

CPA

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

10800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		26		2015

Transaction ID : SA11.6195

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. GARRY MCNABB

B.

Mailing Address 1211 BILL SMITH ROAD

City

COOKEVILLE

State

TN

Zip Code

38501-4465

FEC ID number of contributing
federal political committee.

C

Name of Employer

HUGH E BAILEY & ASSOC.

Occupation

CPA

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

10800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		10		2015

Transaction ID : SA11.6263

Amount of Each Receipt this Period

8100.00

CONTRIBUTION

REATTRIBUTION / REDESIGNATION REQUESTED
(AUTOMATIC)

Full Name (Last, First, Middle Initial)

STAN MCNABB

C.

Mailing Address 100 CHERRY SPRINGS

City

TULLAHOMA

State

TN

Zip Code

37388-5379

FEC ID number of contributing
federal political committee.

C

Name of Employer

STAN MCNABB AUTOMOTIVE FAMILY

Occupation

AUTOMOTIVE BUSINESS

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		10		2015

Transaction ID : SA11.6264

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

11800.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

KELLEY J. MCNEAL**A.**

Mailing Address 765 FIRESIDE DR

City

COOKEVILLE

State

TN

Zip Code

38501-3009

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2015

Transaction ID : SA11.6200

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MS. ROBIN DAVIS MEYER**B.**

Mailing Address 146 BLUEGRASS DR.

City

HENDERSONVILLE

State

TN

Zip Code

37075-2710

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

INTERIOR DESIGNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2015

Transaction ID : SA11.6325

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

KAREN D. MOSS**C.**

Mailing Address 216 THE HOLLOWES CT

City

HENDERSONVILLE

State

TN

Zip Code

37075-9653

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2015

Transaction ID : SA11.6339

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 33 OF 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

MR. LARRY ODOM

Mailing Address 849 PICKWICK COURT

City

GALLATIN

State

TN

Zip Code

37066-7454

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		09		2015

Transaction ID : SA11.6356

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MARK A. ODOM

Mailing Address 2313 HIDDEN COVE RD

City

COOKEVILLE

State

TN

Zip Code

38506-7035

FEC ID number of contributing
federal political committee.

C

Name of Employer

ROGERS GROUP

Occupation

CIVIL ENGINEER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		24		2015

Transaction ID : SA11.6201

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

DR. JEFFREY F. PATTON

Mailing Address 3721 WOODMONT BLVD

City

NASHVILLE

State

TN

Zip Code

37215

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENNESSEE ONCOLOGY

Occupation

PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

430.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		01		2015

Transaction ID : SA.999999

Amount of Each Receipt this Period

430.33

IN-KIND - FOOD/BEVERAGE

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4130.33

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 34 OF 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

PAMELA K. PFEFFER

A.

Mailing Address 836 TREEMONT COURT

City

NASHVILLE

State

TN

Zip Code

37220-1536

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2015

Transaction ID : SA11.6332

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

OTTIS PHILLIPS JR.

B.

Mailing Address 3500 HILHAM RD.

City

COOKEVILLE

State

TN

Zip Code

38506-7113

FEC ID number of contributing
federal political committee.

C

Name of Employer

SEC ENTERPRISES

Occupation

BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2015

Transaction ID : SA11.6394

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. ROBERT POSPISIL JR.

C.

Mailing Address 202 DENISE CIRCLE

City

COTTONTOWN

State

TN

Zip Code

37048-9615

FEC ID number of contributing
federal political committee.

C

Name of Employer

SERVPRO

Occupation

OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6366

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

DR. L. G. PUCKETT IV

A.

Mailing Address 508 NORTH CHURCH ST.

City

LIVINGSTON

State

TN

Zip Code

38570-1539

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

DENTIST

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		26		2015

Transaction ID : SA11.6281

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JOHN ROBERTS

B.

Mailing Address 2610 HILLSBORO BLVD

City

MANCHESTER

State

TN

Zip Code

37355-6537

FEC ID number of contributing
federal political committee.

C

Name of Employer

ROBERT AUTO

Occupation

CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		01		2015

Transaction ID : SA11.6258

Amount of Each Receipt this Period

5400.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MS. JOAN C. ROSS

C.

Mailing Address 102 W CLEVELAND AVE

City

MONTEREY

State

TN

Zip Code

38574-1102

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		24		2015

Transaction ID : SA11.6244

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6650.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

MR. RICHARD H. ROWLETT**A.**

Mailing Address 2003 CRENCOR DR.

City

GOODLETTSVILLE

State

TN

Zip Code

37072-4314

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

ROWLETT ADVERTISING SERVICE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2015

Transaction ID : SA11.6357

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. PETER A. SCHULERT**B.**

Mailing Address 1912 MAYS CHAPEL ROAD

City

MT JULIET

State

TN

Zip Code

37122-2605

FEC ID number of contributing
federal political committee.

C

Name of Employer

ENVIRONMENTAL SCIENCE

Occupation

MANAGER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2015

Transaction ID : SA11.6333

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

EDWARD E. SEASTRAND**C.**

Mailing Address 12 KESWICK LN.

City

FAIRFIELD GLADE

State

TN

Zip Code

38558-2880

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2015

Transaction ID : SA11.6364

Amount of Each Receipt this Period

175.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2175.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
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PAGE 37 OF 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

MRS. SHARON A. SHERIFF

Mailing Address 5621 OTTERSHAW CT.

City

BRENTWOOD

State

TN

Zip Code

37027-4100

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2015

Transaction ID : SA11.6397

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. WILLIAM E. SHERIFF

Mailing Address 5621 OTTERSHAW COURT

City

BRENTWOOD

State

TN

Zip Code

37027-4100

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2015

Transaction ID : SA11.6396

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

DR. DIANNA L. SHIPLEY

Mailing Address 1028 KENDRAS RUN

City

GALLATIN

State

TN

Zip Code

37066

FEC ID number of contributing
federal political committee.

C

Name of Employer

TENNESSEE ONCOLOGY

Occupation

PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

430.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2015

Transaction ID : SA.999998

Amount of Each Receipt this Period

430.33

IN-KIND - FOOD/BEVERAGE

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5830.33

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

MR. CLARENCE W. SMITH

A.

Mailing Address 409 SHAWN LANE

City

COOKEVILLE

State

TN

Zip Code

38501-8036

FEC ID number of contributing
federal political committee.

C

Name of Employer
WALGREENSOccupation
PHARMACIST

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		24		2015

Transaction ID : SA11.6197

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

DR JAMES L. SMITH

B.

Mailing Address 200 SHIPLEY ST

City

COOKEVILLE

State

TN

Zip Code

38501-3461

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
DOCTOR

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		26		2015

Transaction ID : SA11.6205

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. STEPHEN B. SMITH SR.

C.

Mailing Address 7065 MOORES LN STE 300

City

BRENTWOOD

State

TN

Zip Code

37027-8576

FEC ID number of contributing
federal political committee.

C

Name of Employer
HAURY AND SMITHOccupation
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

10800.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		01		2015

Transaction ID : SA11.6261

Amount of Each Receipt this Period

10800.00

CONTRIBUTION

REATTRIBUTION / REDESIGNATION REQUESTED
(AUTOMATIC)

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

12050.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

ANNA STEPHENS

Mailing Address 358 BUCKINGHAM BOULEVARD

City

GALLATIN

State

TN

Zip Code

37066-8581

FEC ID number of contributing
federal political committee.

C

Name of Employer

STATE FARM INSURANCE

Occupation

INSURANCE AGENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		29		2015

Transaction ID : SA11.6297

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MRS. DONNA L. STEPP

Mailing Address 513 NATALIE DR.

City

GOODLETTSVILLE

State

TN

Zip Code

37072-3104

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		30		2015

Transaction ID : SA11.6184

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MRS. DONNA L. STEPP

Mailing Address 513 NATALIE DR.

City

GOODLETTSVILLE

State

TN

Zip Code

37072-3104

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		14		2015

Transaction ID : SA11.6267

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

600.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

MRS. DONNA L. STEPP

A.

Mailing Address 513 NATALIE DR.

City

GOODLETTSVILLE

State

TN

Zip Code

37072-3104

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		25		2015

Transaction ID : SA11.6270

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JOHN D. STITES II

B.

Mailing Address 6750 WALNUT TRACE

City

COOKEVILLE

State

TN

Zip Code

38501-9025

FEC ID number of contributing
federal political committee.

C

Name of Employer

JLS CONSTRUCTION CO. INC.

Occupation

CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		21		2015

Transaction ID : SA11.6183

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MICHAEL L. SWALLOWS

C.

Mailing Address 1335 CHATSWORTH BOULEVARD

City

COOKEVILLE

State

TN

Zip Code

38501-5805

FEC ID number of contributing
federal political committee.

C

Name of Employer

THE SWALLOWS GROUP

Occupation

INSURANCE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		18		2015

Transaction ID : SA11.6207

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3950.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 41 OF 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

MR. JAMES P. TOTTEN

A.

Mailing Address 108 GOVERNORS POINT BLVD

City

HENDERSONVILLE

State

TN

Zip Code

37075-4064

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
09		09		2015

Transaction ID : SA11.6359

Amount of Each Receipt this Period

9800.00

CONTRIBUTION

SEE REATTRIBUTION

Full Name (Last, First, Middle Initial)

MR. JAMES P. TOTTEN

B.

Mailing Address 108 GOVERNORS POINT BLVD

City

HENDERSONVILLE

State

TN

Zip Code

37075-4064

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6359B

Amount of Each Receipt this Period

-5400.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION TO SPOUSE

Full Name (Last, First, Middle Initial)

MR. JAMES P. TOTTEN

C.

Mailing Address 108 GOVERNORS POINT BLVD

City

HENDERSONVILLE

State

TN

Zip Code

37075-4064

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6399B

Amount of Each Receipt this Period

-2700.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

9800.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

MR. JAMES P. TOTTEN

Mailing Address 108 GOVERNORS POINT BLVD

City

HENDERSONVILLE

State

TN

Zip Code

37075-4064

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6401

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

[MEMO ITEM]

REDESIGNATION FROM PRIMARY

Full Name (Last, First, Middle Initial)

MRS. JOSEPHINE B. TOTTEN

Mailing Address 108 GOVERNORS POINT BOULEVARD

City

HENDERSONVILLE

State

TN

Zip Code

37075-

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6398

Amount of Each Receipt this Period

5400.00

CONTRIBUTION

[MEMO ITEM]

REATTRIBUTION FROM SPOUSE

Full Name (Last, First, Middle Initial)

MRS. JOSEPHINE B. TOTTEN

Mailing Address 108 GOVERNORS POINT BOULEVARD

City

HENDERSONVILLE

State

TN

Zip Code

37075-

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6398B

Amount of Each Receipt this Period

-2700.00

CONTRIBUTION

[MEMO ITEM]

REDESIGNATION TO GENERAL

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 43 OF 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

MRS. JOSEPHINE B. TOTTEN

A.

Mailing Address 108 GOVERNORS POINT BOULEVARD

City

HENDERSONVILLE

State

TN

Zip Code

37075-

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6403

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

[MEMO ITEM]

REDESIGNATION FROM PRIMARY

Full Name (Last, First, Middle Initial)

MR. MICHAEL J. WALKER

B.

Mailing Address 215 NEPTUNE DRIVE

City

HENDERSONVILLE

State

TN

Zip Code

37075-3405

FEC ID number of contributing
federal political committee.

C

Name of Employer

WALKER ELECTRIC

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2015

Transaction ID : SA11.6360

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JAMIE WALLACE

C.

Mailing Address 583 BAY POINT DRIVE

City

GALLATIN

State

TN

Zip Code

37066-4487

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2015

Transaction ID : SA11.6363

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5400.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

JAMES D. WALLACE**A.**

Mailing Address 583 BAY POINT DRIVE

City

GALLATIN

State

TN

Zip Code

37066-4487

FEC ID number of contributing
federal political committee.

C

Name of Employer

WALLACE CUSTOM BUILDERS, LLC

Occupation

BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2015

Transaction ID : SA11.6361

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. MR. WILLIAM M. WETHERINGTON

Mailing Address 105 GOLF DR.

City

FAYETTEVILLE

State

TN

Zip Code

37334-2275

FEC ID number of contributing
federal political committee.

C

Name of Employer

AMERICAN DEVELOPMENT CORP.

Occupation

CO-OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2015

Transaction ID : SA11.6395

Amount of Each Receipt this Period

5400.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. MR. CHARLES T. WHEELER

Mailing Address 118 SARANAC TRAIL

City

HENDERSONVILLE

State

TN

Zip Code

37075-4589

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

HOME BUILDER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2015

Transaction ID : SA11.6344

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

10800.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

RICHARD WHITE**A.**

Mailing Address 101 PRIMROSE STREET

City

CHEVY CHASE

State

MD

Zip Code

20815-3324

FEC ID number of contributing
federal political committee.

C

Name of Employer

ROBERTI & WHITE, LLC

Occupation

CONSULTANT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2015

Transaction ID : SA11.6269

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. TOMMY G. WHITTAKER**B.**

Mailing Address 756 N RUSSELL ST.

City

PORTLAND

State

TN

Zip Code

37148-2013

FEC ID number of contributing
federal political committee.

C

Name of Employer

THE FARMERS BANK

Occupation

PRESIDENT/CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2015

Transaction ID : SA11.6331

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

KEITH G. WOLKEN**C.**

Mailing Address 204 ROBIN HILL RD

City

NASHVILLE

State

TN

Zip Code

37205-3524

FEC ID number of contributing
federal political committee.

C

Name of Employer

SMS HOLDINGS

Occupation

CHAIRMAN/CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2015

Transaction ID : SA11.6337

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

MR. JAMES P. WRIGHT**A.**

Mailing Address PO BOX 27

City

COOKEVILLE

State

TN

Zip Code

38503-0027

FEC ID number of contributing
federal political committee.

C

Name of Employer
PHOENIX USA, INC.Occupation
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

Transaction ID : SA11.6206

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MICHAEL ZINSER**B.**

Mailing Address 914 EMILEE POINT

City

GALLATIN

State

TN

Zip Code

37066-4103

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE ZINSER LAW FIRM, PCOccupation
LAWYER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		13		2015

Transaction ID : SA11.6266

Amount of Each Receipt this Period

1700.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

EBENEZER ACRES**C.**

Mailing Address 1725 MT. PLEASANT ROAD

City

COOKEVILLE

State

TN

Zip Code

38506-

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		24		2015

Transaction ID : SA11.6239

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

PARTNERSHIP ATTRIBUTION REQUESTED

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

5400.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. STEWART INVESTMENT, LLC

Mailing Address 7790B HIGHWAY 109 N

City

LEBANON

State

TN

Zip Code

37087-0511

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		30		2015

Transaction ID : SA11.6369

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

PARTNERSHIP ATTRIBUTION REQUESTED

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

196335.66

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	-------------------------------------	--	------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Diane Black for CongressFull Name (Last, First, Middle Initial)
FRIENDS OF RYAN WILLIAMS - CFTRW

Mailing Address 115 RILEY'S PATH

City	State	Zip Code
ALGOOD	TN	38506-

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2015

Transaction ID : SA11.6238

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
SCALISE FOR CONGRESS

Mailing Address 2900 CLEARVIEW PKWY STE 206

City	State	Zip Code
METAIRIE	LA	70006-6532

FEC ID number of contributing
federal political committee.

C C00394957

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2015

Transaction ID : SA11.6233

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
ABBVIE PAC

Mailing Address 1 N WAUKEGAN RD, BLDG. AP6D-2

City	State	Zip Code
N. CHICAGO	IL	60064-1802

FEC ID number of contributing
federal political committee.

C C00536573

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2015

Transaction ID : SA11.6222

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Diane Black for Congress

A. Full Name (Last, First, Middle Initial)
ACADIA HEALTHCARE COMPANY INC PAC

Mailing Address 6100 TOWER CIR STE 1000

City State Zip Code
 FRANKLIN TN 37067-1509

FEC ID number of contributing
federal political committee.

C C00496919

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y
 09 21 2015

Transaction ID : SA11.6343

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ADVANCED MEDICAL TECHNOLOGY ASSN, PAC

Mailing Address 701 PENNSYLVANIA AVE NW, STE 800

City State Zip Code
 WASHINGTON DC 20004-2654

FEC ID number of contributing
federal political committee.

C C00340356

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1437.75

Date of Receipt

M M / D D / Y Y Y Y
 09 30 2015

Transaction ID : SA11.6374

Amount of Each Receipt this Period

1437.75

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
AETNA INC. PAC

Mailing Address 20 F STREET NW, STE 350

City State Zip Code
 WASHINGTON DC 20001-6706

FEC ID number of contributing
federal political committee.

C C00181826

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y
 09 30 2015

Transaction ID : SA11.6392

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

8937.75

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

AFLAC INC. PAC

Mailing Address 1932 WYNNTON RD.

City

COLUMBUS

State

GA

Zip Code

31999-0001

FEC ID number of contributing
federal political committee.**C** C00034157

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

6000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6389

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

AFLAC INC. PAC

Mailing Address 1932 WYNNTON RD.

City

COLUMBUS

State

GA

Zip Code

31999-0001

FEC ID number of contributing
federal political committee.**C** C00034157

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

6000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6390

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ALLSTATE INSURANCE COMPANY PAC (ALLPAC)

Mailing Address 2775 SANDERS RD STE A2W

City

NORTHBROOK

State

IL

Zip Code

60062-6110

FEC ID number of contributing
federal political committee.**C** C00040253

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6379

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

4500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Diane Black for CongressFull Name (Last, First, Middle Initial)
A. AMERICAN ACADEMY OF DERMATOLOGY ASSN. -SKINPAC

Mailing Address 1445 NEW YORK AVE NW, STE 800

City	State	Zip Code
WASHINGTON	DC	20005-2125

FEC ID number of contributing federal political committee. **C C00359539**

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)Election Cycle-to-Date
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2015

Transaction ID : SA11.6211

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. AMERICAN BENEFITS COUNCIL POLITICAL ACTION COMMITTEE

Mailing Address 1501 M ST NW, STE 600

City	State	Zip Code
WASHINGTON	DC	20005-1775

FEC ID number of contributing federal political committee. **C C00153171**

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)Election Cycle-to-Date
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2015

Transaction ID : SA11.6223

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. AMERICAN BANKERS ASSOCIATION- BANK PAC

Mailing Address 1120 CONNECTICUT AVENUE NW

City	State	Zip Code
WASHINGTON	DC	20036-3902

FEC ID number of contributing federal political committee. **C C00004275**

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)Election Cycle-to-Date
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6385

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

4500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Diane Black for Congress

Full Name (Last, First, Middle Initial)

AMERICAN DENTAL ASSOCIATION PAC

Mailing Address 1111-14TH STREET NW, STE 1100

City

WASHINGTON

State

DC

Zip Code

20005-5627

FEC ID number of contributing
federal political committee.**C** C00000729

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	18	/	2015

Transaction ID : SA11.6214

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS PAC-AICPA

Mailing Address 220 LEIGH FARM RD.

City

DURHAM

State

NC

Zip Code

27707-8110

FEC ID number of contributing
federal political committee.**C** C00077321

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2015

Transaction ID : SA11.6416

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ANTHEM PAC

Mailing Address 120 MONUMENT CIR

City

INDIANAPOLIS

State

IN

Zip Code

46204-4906

FEC ID number of contributing
federal political committee.**C** C00197228

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2015

Transaction ID : SA11.6378

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

4500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	-------------------------------------	--	------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

ARPAC

Mailing Address 451 FLORIDA BLVD

PREMIER TOWER 19TH FL

City

BATON ROUGE

State

LA

Zip Code

70801-1700

FEC ID number of contributing
federal political committee.**C** C00226472

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2015

Transaction ID : SA11.6352

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

AT&T FEDERAL PAC

Mailing Address 208 S AKARD ST, STE 2701

City

DALLAS

State

TX

Zip Code

75202-4206

FEC ID number of contributing
federal political committee.**C** C00109017

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2015

Transaction ID : SA11.6353

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

AZ PAC

Mailing Address P.O. BOX 15438

City

WILMINGTON

State

DE

Zip Code

19850-

FEC ID number of contributing
federal political committee.**C** C00279455

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6427

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

4500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Diane Black for Congress

A. Full Name (Last, First, Middle Initial)
BLOOMIN' BRANDS INC. PAC

Mailing Address 2202 N WEST SHORE BLVD

City	State	Zip Code
TAMPA	FL	33607-5747

FEC ID number of contributing federal political committee.

C C00253153

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 30 / 2015

Transaction ID : SA11.6393

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BOSTON SCIENTIFIC CORP. PAC

Mailing Address ONE BOSTON SCIENTIFIC PL.

City	State	Zip Code
NATICK	MA	01760-1536

FEC ID number of contributing federal political committee.

C C00472878

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 18 / 2015

Transaction ID : SA11.6216

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BOSTON SCIENTIFIC CORP. PAC

Mailing Address ONE BOSTON SCIENTIFIC PL.

City	State	Zip Code
NATICK	MA	01760-1536

FEC ID number of contributing federal political committee.

C C00472878

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 18 / 2015

Transaction ID : SA11.6217

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

BROOKE HOLDINGS INC. & JACKSON NATIONAL LIFE PAC

A.

Mailing Address 1 CORPORATE WAY

City

LANSING

State

MI

Zip Code

48951-1001

FEC ID number of contributing
federal political committee.

C C00254953

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2015

Transaction ID : SA11.6227

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

BUFFALO WILD WINGS, INC PAC

B.

Mailing Address 5500 WAYZATA BLVD STE 1600

City

MINNEAPOLIS

State

MN

Zip Code

55416-1237

FEC ID number of contributing
federal political committee.

C C00492157

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6388

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

CARDINAL HEALTH INC. PAC

C.

Mailing Address 7000 CARDINAL PLACE

City

DUBLIN

State

OH

Zip Code

43017-1091

FEC ID number of contributing
federal political committee.

C C00332833

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2015

Transaction ID : SA11.6210

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

CELGENE CORPORATION PAC

Mailing Address 86 MORRIS AVE.

City

SUMMIT

State

NJ

Zip Code

07901-3915

FEC ID number of contributing
federal political committee.**C** C00514331

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		18		2015

Transaction ID : SA11.6226

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

CHEVRON EMPLOYEES PAC

Mailing Address PO BOX 6016

City

SAN RAMON

State

CA

Zip Code

94583-0716

FEC ID number of contributing
federal political committee.**C** C00035006

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		24		2015

Transaction ID : SA11.6229

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

CITIGROUP, INC PAC

Mailing Address 1101 PENNSYLVANIA AVE NW, STE 1000

City

WASHINGTON

State

DC

Zip Code

20004-2524

FEC ID number of contributing
federal political committee.**C** C00008474

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		18		2015

Transaction ID : SA11.6224

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

4500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

COMCAST CORPORATION & NBCUNIVERSAL PAC

A.

 Mailing Address ONE COMCAST CENTER,
 1701 JFK BOULEVARD

City PHILADELPHIA	State PA	Zip Code 19103-2838
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee.

C C00248716

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M 08	/	D D D 18	/	Y Y Y Y Y 2015
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Transaction ID : SA11.6220

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

COUNCIL OF INSURANCE AGENTS & BROKERS PAC

B.

Mailing Address 701 PENNSYLVANIA AVE NW, STE 750

City WASHINGTON	State DC	Zip Code 20004-2661
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee.

C C00039578

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

10000.00

Date of Receipt

M M M 09	/	D D D 30	/	Y Y Y Y Y 2015
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Transaction ID : SA11.6380

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

COUNCIL OF INSURANCE AGENTS & BROKERS PAC

C.

Mailing Address 701 PENNSYLVANIA AVE NW, STE 750

City WASHINGTON	State DC	Zip Code 20004-2661
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee.

C C00039578

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

10000.00

Date of Receipt

M M M 09	/	D D D 30	/	Y Y Y Y Y 2015
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Transaction ID : SA11.6381

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

11000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Diane Black for Congress

Full Name (Last, First, Middle Initial)

CRACKER BARREL OLD COUNTRY STORE INC. PAC

Mailing Address PO BOX 787

City

LEBANON

State

TN

Zip Code

37088-0787

FEC ID number of contributing
federal political committee.**C** C00252791

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6387

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

DARDEN RESTAURANTS INC. PAC

Mailing Address 1000 DARDEN CENTER DR.

City

ORLANDO

State

FL

Zip Code

32837-4032

FEC ID number of contributing
federal political committee.**C** C00108282

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6386

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

EASTMAN PAC OF EASTMAN CHEMICAL COMPANY PAC

Mailing Address P.O. BOX 431

City

KINGSPORT

State

TN

Zip Code

37662-0431

FEC ID number of contributing
federal political committee.**C** C00113159

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6372

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

8500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

EDWARDS LIFESCIENCES PAC

A.

Mailing Address ONE EDWARDS WAY

City

IRVINE

State

CA

Zip Code

92614-5688

FEC ID number of contributing
federal political committee.

C C00411900

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6419

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ENTERPRISE HOLDINGS, INC PAC

B.

Mailing Address 600 CORPORATE PARK DRIVE

City

SAINT LOUIS

State

MO

Zip Code

63105-4204

FEC ID number of contributing
federal political committee.

C C00219642

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6426

Amount of Each Receipt this Period

3000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ERNST & YOUNG PAC

C.

Mailing Address 1101 NEW YORK AVENUE NW

City

WASHINGTON

State

DC

Zip Code

20005-4269

FEC ID number of contributing
federal political committee.

C C00227744

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		18		2015

Transaction ID : SA11.6213

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Diane Black for Congress

Full Name (Last, First, Middle Initial)

EYE OF THE TIGER PAC

Mailing Address P.O. BOX 2485

City
SPRINGFIELDState Zip Code
VA 22152-0485FEC ID number of contributing
federal political committee.**C** C00467431

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		24		2015

Transaction ID : SA11.6232

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

FRATERNITY & SORORITY PAC

Mailing Address PO BOX 3435

City
ALEXANDRIAState Zip Code
VA 22302-0435FEC ID number of contributing
federal political committee.**C** C00410068

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		18		2015

Transaction ID : SA11.6225

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

HCA GOOD GOVERNMENT FUND

Mailing Address PO BOX 550

City
NASHVILLEState Zip Code
TN 37202-0550FEC ID number of contributing
federal political committee.**C** C00067231

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		21		2015

Transaction ID : SA11.6355

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

2500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Diane Black for Congress

A. Full Name (Last, First, Middle Initial)
INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA PAC- INSUR

Mailing Address **20 F STREET NW, STE 610**

City WASHINGTON	State DC	Zip Code 20001-6707
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C C00022343**

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2015

Transaction ID : **SA11.6375**

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
INGRAM BARGE COMPANY PAC

Mailing Address **4400 HARDING ROAD**

City NASHVILLE	State TN	Zip Code 37205-2204
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C C00364471**

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 21 / 2015

Transaction ID : **SA11.6351**

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
INSURED RETIREMENT INSTITUTE, INC. PAC

Mailing Address **1100 VERMONT AVE NW , 10TH FL**

City WASHINGTON	State DC	Zip Code 20005-6327
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C C00490474**

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2015

Transaction ID : **SA11.6377**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

8500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

LIBERTY MUTUAL INSURANCE CO PAC

Mailing Address 175 BERKELEY ST

City

BOSTON

State

MA

Zip Code

02116-5066

FEC ID number of contributing
federal political committee.

C C00171843

Name of Employer

Occupation

Receipt For: 2016

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6384

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MEDTRONIC INC. PAC

Mailing Address 950 F STREET NW, STE 500

City

WASHINGTON

State

DC

Zip Code

20004-1478

FEC ID number of contributing
federal political committee.

C C00311878

Name of Employer

Occupation

Receipt For: 2016

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		18		2015

Transaction ID : SA11.6215

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MERCK & CO., INC. EMPLOYEES PAC

Mailing Address 601 PENNSYLVANIA AVENUE NW, N. BLD

City

WASHINGTON

State

DC

Zip Code

20004-2601

FEC ID number of contributing
federal political committee.

C C00097485

Name of Employer

Occupation

Receipt For: 2016

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6373

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Diane Black for Congress

A. Full Name (Last, First, Middle Initial)
NATIONAL ASSOC. OF REAL ESTATE INVESTMENT TRUSTS PAC-REITPAC

Mailing Address 1875 I STREET NW, STE 600

City State Zip Code
 WASHINGTON DC 20006-5413

FEC ID number of contributing
federal political committee. **C** C00303339

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 18 2015

Transaction ID : SA11.6221

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS PAC

Mailing Address 2901 TELESTAR COURT

City State Zip Code
 FALLS CHURCH VA 22042-1260

FEC ID number of contributing
federal political committee. **C** C00005249

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date
 6000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 18 2015

Transaction ID : SA11.6228

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS PAC

Mailing Address 2901 TELESTAR COURT

City State Zip Code
 FALLS CHURCH VA 22042-1260

FEC ID number of contributing
federal political committee. **C** C00005249

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 6000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 18 2015

Transaction ID : SA11.6253

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Diane Black for Congress

A. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF MUTUAL INSURANCE COMPANIES PAC-NAMIC

Mailing Address 3601 VINCENNES RD.

City State Zip Code
 INDIANAPOLIS IN 46268-1154

FEC ID number of contributing
federal political committee.

C C00170258

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
 09 30 2015

Transaction ID : SA11.6418

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NATIONAL BEER WHOLESALERS ASSOCIATION (NBWA PAC)

Mailing Address 1101 KING STREET, SUITE 600

City State Zip Code
 ALEXANDRIA VA 22314-2965

FEC ID number of contributing
federal political committee.

C C00144766

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y
 08 24 2015

Transaction ID : SA11.6231

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NATIONAL RESTAURANT ASSOCIATION PAC

Mailing Address 2055 L STREET NW

City State Zip Code
 WASHINGTON DC 20036-4983

FEC ID number of contributing
federal political committee.

C C00003764

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y
 09 30 2015

Transaction ID : SA11.6391

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

6000.00

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Diane Black for Congress

A. Full Name (Last, First, Middle Initial)
NRA POLITICAL VICTORY FUND

Mailing Address 11250 WAPLES MILL RD.

City	State	Zip Code
FAIRFAX	VA	22030-7550

FEC ID number of contributing
federal political committee.

C C00053553

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6417

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PFIZER PAC

Mailing Address 235 EAST 42ND STREET

City	State	Zip Code
NEW YORK	NY	10017-5703

FEC ID number of contributing
federal political committee.

C C00016683

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

6000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6382

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
POLITICAL ACTION CMTE OF THE AMERICAN ACADEMY OF ORTHOP-AAOS

Mailing Address 317 MASSACHUSETTS AVENUE NE

City	State	Zip Code
WASHINGTON	DC	20002-5769

FEC ID number of contributing
federal political committee.

C C00343137

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SA11.6383

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

4500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Diane Black for Congress

A. Full Name (Last, First, Middle Initial)
RAYTHEON PAC

Mailing Address 1100 WILSON BLVD, STE 1500

City State Zip Code
 ARLINGTON VA 22209-3900

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 5000.00

Date of Receipt

M M / D D / Y Y Y Y
 08 18 2015

Transaction ID : SA11.6218

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
REALTORS PAC- R.P.A.C.

Mailing Address 430 N. MICHIGAN AVENUE

City State Zip Code
 CHICAGO IL 60611-4011

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 2000.00

Date of Receipt

M M / D D / Y Y Y Y
 09 21 2015

Transaction ID : SA11.6354

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SANOI US SERVICES INC. EMPLOYEES' PAC

Mailing Address 55 CORPORATE DR.

City State Zip Code
 BRIDGEWATER NJ 08807-1265

FEC ID number of contributing federal political committee. **C** C00144345

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 1000.00

Date of Receipt

M M / D D / Y Y Y Y
 08 13 2015

Transaction ID : SA11.6212

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

SMITH & NEPHEW INC, PAC

Mailing Address 7135 GOODLETT FARMS PARKWAY

City

CORDOVA

State

TN

Zip Code

38016-

FEC ID number of contributing
federal political committee.**C** C00374066

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	18	/	2015

Transaction ID : SA11.6219

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

SMITHS GROUP SERVICES CORP. -SMITHS PAC

Mailing Address 425 3RD STREET SW, STE 875

City

WASHINGTON

State

DC

Zip Code

20024-3237

FEC ID number of contributing
federal political committee.**C** C00448324

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	28	/	2015

Transaction ID : SA11.6188

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

SPECTRA ENERGY CORP. PAC- SPECTRA-DCP PAC

Mailing Address 5400 WESTHEIMER COURT

City

HOUSTON

State

TX

Zip Code

77056-5353

FEC ID number of contributing
federal political committee.**C** C00429662

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	24	/	2015

Transaction ID : SA11.6230

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

4000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Diane Black for Congress

A. Full Name (Last, First, Middle Initial)
THE CHUBB CORPORATION PAC

Mailing Address 15 MOUNTIAN VIEW RD

City State Zip Code
 WARREN NJ 07059-6711

FEC ID number of contributing
federal political committee.

C C00229203

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 30 2015

Transaction ID : SA11.6376

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
THE WENDY'S COMPANY POLITICAL ACTION COMMITTEE

Mailing Address ONE DAVE THOMAS BLVD

City State Zip Code
 DUBLIN OH 43017-5452

FEC ID number of contributing
federal political committee.

C C00369090

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 30 2015

Transaction ID : SA11.6420

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3500.00

116437.75

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. MATT COKER

Mailing Address 2301 SPRINGDALE DRIVE

City	State	Zip Code
NASHVILLE	TN	37215

Purpose of Disbursement
TRAVEL- MILEAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		17		2015

Amount of Each Disbursement this Period

393.41

Transaction ID : SB17.9168

B. MATT COKER

Mailing Address 2301 SPRINGDALE DRIVE

City	State	Zip Code
NASHVILLE	TN	37215

Purpose of Disbursement
TRAVEL- MILEAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		27		2015

Amount of Each Disbursement this Period

568.17

Transaction ID : SB17.9172

C. MATT COKER

Mailing Address 2301 SPRINGDALE DRIVE

City	State	Zip Code
NASHVILLE	TN	37215

Purpose of Disbursement
TRAVEL- MILEAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		30		2015

Amount of Each Disbursement this Period

435.87

Transaction ID : SB17.9173

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1397.45

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. DR. JEFFREY F. PATTON

Mailing Address 3721 WOODMONT BLVD

City	State	Zip Code
NASHVILLE	TN	37215

Purpose of Disbursement
IN-KIND - FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2015

Amount of Each Disbursement this Period

430.33

Transaction ID : SB.9999999

B. DR. DIANNA L. SHIPLEY

Mailing Address 1028 KENDRAS RUN

City	State	Zip Code
GALLATIN	TN	37066

Purpose of Disbursement
IN-KIND - FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2015

Amount of Each Disbursement this Period

430.33

Transaction ID : SB.9999998

C. AMERICAN MEDIA & ADVOCACY GROUP

Mailing Address 815 SLATERS LANE

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
MEDIA

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Disbursement this Period

10150.00

Transaction ID : SB17.9145

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

11010.66

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. BEARNAISE

Mailing Address 315 PENNSYLVANIA AVE SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
FACILITY RENTAL/CATERING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Disbursement this Period

1672.00

Transaction ID : SB17.9133

B. BON VIVANT CATERING

Mailing Address 1251 PINE HILL RD

City	State	Zip Code
MCLEAN	VA	22101

Purpose of Disbursement
CATERING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Disbursement this Period

1672.00

Transaction ID : SB17.9099

C. CAPITOL HILL CLUB

Mailing Address 300 1ST ST SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Disbursement this Period

270.19

Transaction ID : SB17.9141

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2704.69

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. CENTRAL MICHEL RICHARD

Mailing Address 1001 PENNSYLVANIA AVE NW

City	State	Zip Code
WASHINGTON	DC	20004

Purpose of Disbursement
CATERING/FACILITY RENTAL

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 27 / 2015

Amount of Each Disbursement this Period

1784.50

Transaction ID : SB17.9101

B. CMDI

Mailing Address 1593 SPRING HILL ROAD STE 400

City	State	Zip Code
VIENNA	VA	22182

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 02 / 2015

Amount of Each Disbursement this Period

353.12

Transaction ID : SB17.9106

C. COMPLIANCE CONSULTING LLC

Mailing Address P.O. BOX 365

City	State	Zip Code
MCLEAN	VA	22101

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 17 / 2015

Amount of Each Disbursement this Period

1800.00

Transaction ID : SB17.9102

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3937.62

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. COMPLIANCE CONSULTING LLC

Mailing Address P.O. BOX 365

City	State	Zip Code
MCLEAN	VA	22101

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		27		2015

Amount of Each Disbursement this Period

1800.00

Transaction ID : SB17.9103

B. COMPLIANCE CONSULTING LLC

Mailing Address P.O. BOX 365

City	State	Zip Code
MCLEAN	VA	22101

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		21		2015

Amount of Each Disbursement this Period

1800.00

Transaction ID : SB17.9104

C. ELAVON

Mailing Address 7300 CHAPMAN HWY

City	State	Zip Code
KNOXVILLE	TN	37920

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		02		2015

Amount of Each Disbursement this Period

544.40

Transaction ID : SB17.9116

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4144.40

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. ELAVON

Mailing Address 7300 CHAPMAN HWY

City	State	Zip Code
KNOXVILLE	TN	37920

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 03 / 2015

Amount of Each Disbursement this Period

347.94

Transaction ID : SB17.9119

B. FIOLA

Mailing Address 601 PENNSYLVANIA AVE NW

City	State	Zip Code
WASHINGTON	DC	20004

Purpose of Disbursement
FACILITY RENTAL/CATERING

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 17 / 2015

Amount of Each Disbursement this Period

1325.20

Transaction ID : SB17.9132

C. H2 CAPITAL CONSULTING LLC

Mailing Address 325 7TH STREET NW STE 400

City	State	Zip Code
WASHINGTON	DC	20004

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 27 / 2015

Amount of Each Disbursement this Period

3000.00

Transaction ID : SB17.9135

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4673.14

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. H2 CAPITAL CONSULTING LLC

Mailing Address 325 7TH STREET NW STE 400

City	State	Zip Code
WASHINGTON	DC	20004

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Disbursement this Period

8000.00

Transaction ID : SB17.9136

B. H2 CAPITAL CONSULTING LLC

Mailing Address 325 7TH STREET NW STE 400

City	State	Zip Code
WASHINGTON	DC	20004

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		27		2015

Amount of Each Disbursement this Period

3000.00

Transaction ID : SB17.9137

C. H2 CAPITAL CONSULTING LLC

Mailing Address 325 7TH STREET NW STE 400

City	State	Zip Code
WASHINGTON	DC	20004

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		25		2015

Amount of Each Disbursement this Period

3000.00

Transaction ID : SB17.9139

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

14000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. H2 CAPITAL CONSULTING LLC

Mailing Address 325 7TH STREET NW STE 400

City	State	Zip Code
WASHINGTON	DC	20004

Purpose of Disbursement
FINANCE CONSULTING/TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07	/	17	/	2015

Amount of Each Disbursement this Period

3246.10

Transaction ID : SB17.9140

B. H2 CAPITAL CONSULTING LLC

Mailing Address 325 7TH STREET NW STE 400

City	State	Zip Code
WASHINGTON	DC	20004

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09	/	21	/	2015

Amount of Each Disbursement this Period

1535.90

Transaction ID : SB17.9144

C. KAEGI RESOURCES

Mailing Address 1015 STONEBRIDGE PARK DRIVE

City	State	Zip Code
FRANKLIN	TN	37069

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09	/	21	/	2015

Amount of Each Disbursement this Period

24000.00

Transaction ID : SB17.9138

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

28782.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. MATT COKER

Mailing Address 2301 SPRINGDALE DRIVE

City	State	Zip Code
NASHVILLE	TN	37215

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Disbursement this Period

4000.00

Transaction ID : SB17.9151

B. MATT COKER

Mailing Address 2301 SPRINGDALE DRIVE

City	State	Zip Code
NASHVILLE	TN	37215

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		27		2015

Amount of Each Disbursement this Period

4000.00

Transaction ID : SB17.9152

C. MATT COKER

Mailing Address 2301 SPRINGDALE DRIVE

City	State	Zip Code
NASHVILLE	TN	37215

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		30		2015

Amount of Each Disbursement this Period

4000.00

Transaction ID : SB17.9153

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

12000.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. ON MESSAGE INC.

Mailing Address 705 MELVIN AVE #105

City	State	Zip Code
ANNAPOLIS	MD	21401

Purpose of Disbursement
DIGITAL CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		04		2015

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.9128

B. ON MESSAGE INC.

Mailing Address 705 MELVIN AVE #105

City	State	Zip Code
ANNAPOLIS	MD	21401

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.9175

C. ON MESSAGE INC.

Mailing Address 705 MELVIN AVE #105

City	State	Zip Code
ANNAPOLIS	MD	21401

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		17		2015

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.9176

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4000.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. RISTORANTE TOSCA

Mailing Address 1112 F ST NW

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
FACILITY RENTAL/CATERING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Disbursement this Period

1352.65

Transaction ID : SB17.9134

B. SARGENT'S INC

Mailing Address 2342 OLD NATCHEZ TRACE

City
FRANKLINState
TNZip Code
37069Purpose of Disbursement
CATERING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		30		2015

Amount of Each Disbursement this Period

7080.56

Transaction ID : SB17.9100

C. SOUTHWEST AIR

Mailing Address 2702 LOVE FIELD DR

City
DALLASState
TXZip Code
75235Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Disbursement this Period

470.99

Transaction ID : SB17.9166

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

8904.20

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. SOUTHWEST AIR

Mailing Address 2702 LOVE FIELD DR

City	State	Zip Code
DALLAS	TX	75235

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		13		2015

Amount of Each Disbursement this Period

224.00

Transaction ID : SB17.9167

B. SOUTHWEST AIR

Mailing Address 2702 LOVE FIELD DR

City	State	Zip Code
DALLAS	TX	75235

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		03		2015

Amount of Each Disbursement this Period

330.50

Transaction ID : SB17.9170

C. SOUTHWEST AIR

Mailing Address 2702 LOVE FIELD DR

City	State	Zip Code
DALLAS	TX	75235

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		03		2015

Amount of Each Disbursement this Period

285.00

Transaction ID : SB17.9171

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

839.50

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. TFRW CONVENTION FUND

Mailing Address 595 PARNELL RD

City	State	Zip Code
OLD HICKORY	TN	37138

Purpose of Disbursement
REGISTRATION FEE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 15 / 2015

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.9158

B. VERIZON WIRELESS

Mailing Address PO BOX 553

City	State	Zip Code
WARRENDALE	PA	15086

Purpose of Disbursement
PHONE SERVICE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 13 / 2015

Amount of Each Disbursement this Period

287.68

Transaction ID : SB17.9147

C. VERIZON WIRELESS

Mailing Address PO BOX 553

City	State	Zip Code
WARRENDALE	PA	15086

Purpose of Disbursement
PHONE SERVICE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 11 / 2015

Amount of Each Disbursement this Period

287.68

Transaction ID : SB17.9148

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

3075.36

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. VERIZON WIRELESS

Mailing Address PO BOX 553

City	State	Zip Code
WARRENDALE	PA	15086

Purpose of Disbursement
PHONE SERVICE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		11		2015

Amount of Each Disbursement this Period

287.74

Transaction ID : SB17.9149

B. WASHINGTON NATIONALS

Mailing Address 1500 S CAPITOL ST SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
FACILITY RENTAL/CATERING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Disbursement this Period

2777.22

Transaction ID : SB17.9131

C. WASHINGTON NATIONALS

Mailing Address 1500 S CAPITOL ST SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
REGISTRATION FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Disbursement this Period

334.20

Transaction ID : SB17.9157

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3399.16

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. WATERCOLOR INN & RESORT

Mailing Address 34 GOLDENROD CIR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		24		2015

City	State	Zip Code
SANTA ROSA BEACH	FL	32459

Amount of Each Disbursement this Period

747.04

Purpose of Disbursement
TRAVELCategory/
Type

Transaction ID : SB17.9169

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

747.04

108448.43

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. JAMES VAUGHN

Mailing Address 2981 CAGES BEND RD

City
GALLATINState
TNZip Code
37066Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		16		2015

Amount of Each Disbursement this Period

900.00

Transaction ID : SB20A.9105

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

Amount of Each Disbursement this Period

--

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

900.00

900.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Diane Black for Congress

Full Name (Last, First, Middle Initial)

A. TENNESSEE YOUNG REPUBLICANS

Mailing Address 760 WEDGEWOOD PARK APT 101

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		29		2015

City	State	Zip Code
NASHVILLE	TN	37203

Amount of Each Disbursement this Period

40000.00

Purpose of Disbursement
DONATIONCategory/
Type

Transaction ID : SB21.9129

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. NRCC

Mailing Address 320 1ST ST SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		18		2015

City	State	Zip Code
WASHINGTON	DC	20003

Amount of Each Disbursement this Period

40000.00

Purpose of Disbursement
TRANSFERCategory/
Type

Transaction ID : SB21.9165

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

City	State	Zip Code
------	-------	----------

Amount of Each Disbursement this Period

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Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

40500.00

40500.00